

NAACCR Central Registry Webinar Series

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Prostate Cancer Surveillance Data Collection

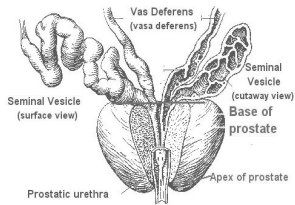





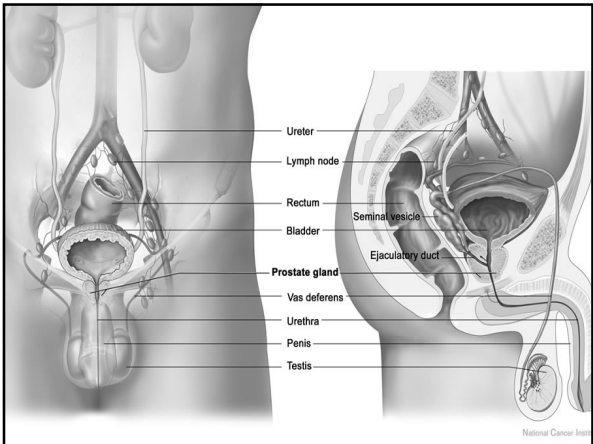
Image Source: SEER Training Website

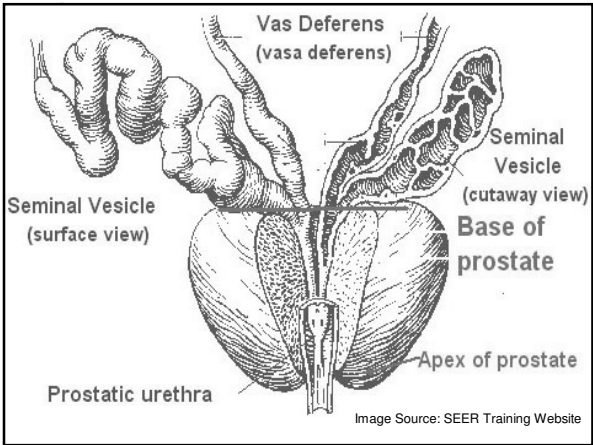
Prostate Cancer

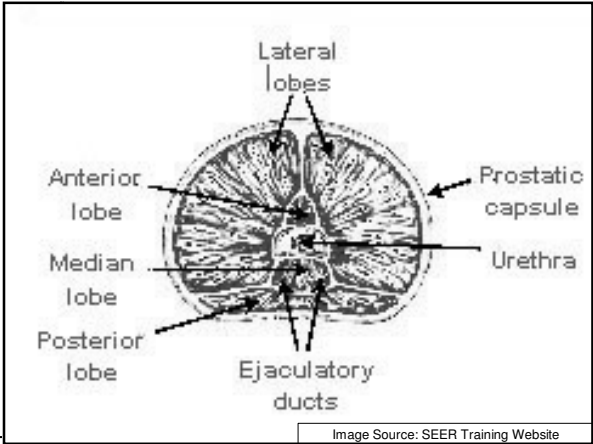
- Prostate cancer is the single most common form of non-skin cancer in men in the United States.
- In 2007 it is estimate there will be:
New cases: 218,890
Deaths: 27,050

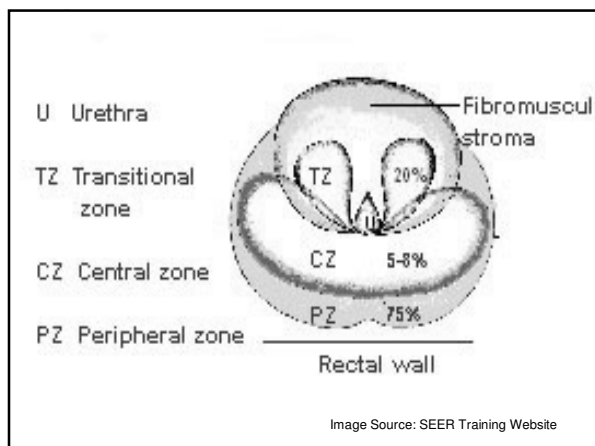



<http://www.cancer.gov/cancertopics/types/prostate>










	<h2 style="text-align: center;">Histology</h2> <ul style="list-style-type: none"> ■ Acinar adenocarcinoma of the prostate: <ul style="list-style-type: none"> ◆ The prostate gland is sponge-like consisting primarily of acini or very tiny sacs that produce the fluids for ejaculation. ■ Acinar adenocarcinoma of the prostate is not a specific histologic type. <ul style="list-style-type: none"> ◆ The term acinar refers to the fact that the adenocarcinoma originates in the prostatic acini. ■ 95% of all prostate cancers are (acinar) adenocarcinoma. <div style="text-align: right;">  </div>
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	<h2 style="text-align: center;">Coding Grade for Prostate</h2> <ul style="list-style-type: none"> ■ Histologic grade, differentiation, codes <ul style="list-style-type: none"> 1 = well differentiated 2 = moderately differentiated 3= poorly differentiated 4= undifferentiated <div style="text-align: right;">  </div>
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Coding Grade for Prostate

■ Code grade in priority order

1. Gleason's score
2. Terminology
3. Histologic grade
4. Nuclear grade



Prostate Grade Conversion Table

Code	Gleason Score	Gleason Pattern	Terminology	Hist Grade
1	2, 3, 4	1, 2	Well differentiated	I
2	5, 6	3	Moderately differentiated	II
3	7, 8, 9, 10	4, 5	Poorly differentiated	III




Coding Grade for Prostate

■ Gleason's system

- ◆ 5 histologic components
- ◆ Score is sum of primary and secondary patterns



Gleason's Pattern



1. Small, uniform glands

2. More stroma between glands

3. Distinctly infiltrative margins

4. Irregular masses of neoplastic glands


5. Only occasional gland formation

Well differentiated

Moderately differentiated

Poorly diff. / Anaplastic

Abstracting Prostate Cases



Date of Diagnosis Prostate

■ Review all sources for first date of diagnosis


◆ Physical exams

◆ Imaging reports

◆ Pathologic confirmation


◆ Physicians' and nurses' notes

◆ Consultation reports




Prostate Cancer Work-up

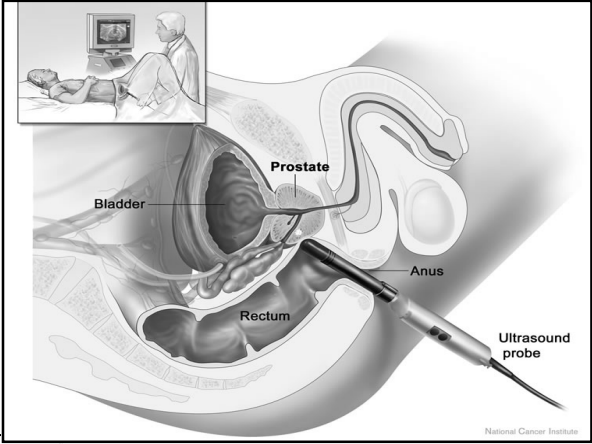
- PSA screening
 - ◆ Not diagnostic without other work-up
- History and physical examination
 - ◆ Digital rectal exam (DRE)
 - ◆ Clinically apparent: palpable mass or nodule



Prostate Cancer Work-up

- Imaging studies
 - ◆ Transrectal ultrasound (TRUS)
 - ◆ CT scans
 - ◆ Abdomen/pelvis
 - ◆ Bone
 - ◆ Liver/spleen
 - ◆ Brain
 - ◆ Chest x-ray

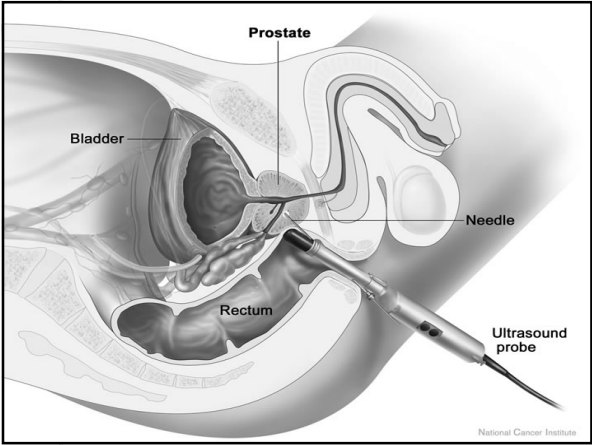




Prostate Cancer Work-up

- Endoscopy
 - ◆ Cystoscopy, proctosigmoidoscopy, laparoscopy
- Transrectal needle biopsy
- Transperineal needle biopsy
- Sextant biopsy

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Questions?

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Quiz 1

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